

**PATENT NUMBER**

ISSUE CLASSIFICATION	
Class	Subclass

O.I.P.E. MA <i>[Signature]</i> SCANNED Q.A. <i>[Signature]</i>	PATENT DATE
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TITLE	APPLICANTS
1. <b>Chairman</b>	1. <b>Mr. J. H. ...</b>
2. <b>Vice Chairman</b>	2. <b>Mr. J. H. ...</b>
3. <b>Secretary</b>	3. <b>Mr. J. H. ...</b>
4. <b>Treasurer</b>	4. <b>Mr. J. H. ...</b>
5. <b>Member</b>	5. <b>Mr. J. H. ...</b>
6. <b>Member</b>	6. <b>Mr. J. H. ...</b>
7. <b>Member</b>	7. <b>Mr. J. H. ...</b>
8. <b>Member</b>	8. <b>Mr. J. H. ...</b>
9. <b>Member</b>	9. <b>Mr. J. H. ...</b>
10. <b>Member</b>	10. <b>Mr. J. H. ...</b>
11. <b>Member</b>	11. <b>Mr. J. H. ...</b>
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94. <b>Member</b>	94. <b>Mr. J. H. ...</b>
95. <b>Member</b>	95. <b>Mr. J.</b>

PTO-2040  
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<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>		<b>CLAIMS ALLOWED</b>	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner)		<b>NOTICE OF ALLOWANCE MAILED</b>	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____	_____ (Primary Examiner)		<b>ISSUE FEE</b>	
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner)		Amount Due	Date Paid
			<b>ISSUE BATCH NUMBER</b>	

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